## Case 17-31030 Doc 1 Filed 12/11/17 Entered 12/11/17 10:10:17 Desc Main Document Page 1 of 49

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MASSACHUSETTS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Lisa First name  M Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Sady Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Lisa M Perry	
	Include your married or maiden names.	,	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2036	

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Case number (if known)

Debtor 1 Lisa M Sady

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 20 North Boulevard West Springfield, MA 01089-2843 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Hampden County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 17-31030 Doc 1 Filed 12/11/17 Entered 12/11/17 10:10:17 Desc Main Page 3 of 49 Document Case number (if known) Debtor 1 Lisa M Sady Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

■ No

☐ Yes.

ı res.

Debtor Relationship to you

District When Case number, if known

Debtor Relationship to you

District When Case number, if known

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

Document Page 4 of 49 Case number (if known) Debtor 1 Lisa M Sady Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Chapter 11 of the Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Lisa M Sady

Debtor 1 Lisa M Sady

Document Page 5 of 49

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	Case 17-3:	1030	Doc 1 Filed 12/1 Docume		Entered 12/11/17 10:10: Page 6 of 49 Case number (#	
20.0	6: Answer These Questi	one for P	Conorting Durnosas		•	
_	What kind of debts do you have?	16a.	Are your debts primarily	consum	ner debts? Consumer debts are defined family, or household purpose."	I in 11 U.S.C. § 101(8) as "incurred by an
	you nave:		□ No. Go to line 16b.	i con an	diffing of flocoordinal purposes.	•
			Yes. Go to line 17.			
		16b.	Are your debts primarily	<b>busines</b> vestmer	ss debts? Business debts are debts tha	t you incurred to obtain
			☐ No. Go to line 16c.			·
			☐ Yes. Go to line 17.		•	
		16c.		owe tha	at are not consumer debts or business of	lebts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	er 7. Go	to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	<b>■</b> Yes.	are paid that funds will be a	. Do you available	u estimate that after any exempt propert e to distribute to unsecured creditors?	y is excluded and administrative expenses
	are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes	1	·	
18.	How many Creditors do	<b>1</b> -49			<b>1,000-5,000</b>	<b>25,001-50,000</b>
	you estimate that you owe?	□ 50-99	<b>)</b>		☐ 5001-10,000	☐ 50,001-100,000
		☐ 100-1 ☐ 200-9	• •		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$	\$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000		☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		₩ \$500,	,001 - \$1 million			
20.	How much do you	<b>□</b> \$0 - \$	•		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	_	001 - \$100,000		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
		_	,001 - \$500,000		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion
		— \$500,	,001 - \$1 million		_ + (00,000,00, + 000 mme)	
Par	17: Sign Below				·	
For	you	I have ex	kamined this petition, and I d	eclare u	nder penalty of perjury that the information	tion provided is true and correct.
		If I have United S	chosen to file under Chapter states Code. I understand the	7, I am relief a	aware that I may proceed, if eligible, ur vallable under each chapter, and I choo	nder Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.
					y or agree to pay someone who is not a ce required by 11 U.S.C. § 342(b).	n attorney to help me fill out this
		I request	relief in accordance with the	e chapte	r of title 11, United States Code, specifi	ed in this petition.
		I underşi bankrupi and 357	tcy case can result in fines u	nt, conce p to \$25	ealing-property- or obtaining money or p 0,000, or imprisonment for up to 20 yea	property by fraud in connection with a lirs, or both. 18 U.S.C. §§ 152, 1341, 1519,
	(		/ Wa /// x	1ar	def	
		Lisa M Signatur	Sady e/of Debtor 1	,	Signature of Debtor 2	
		/	mluham	(	$\mathcal{J}$	· ·
		Executé	MM/DD/YYYY		Executed on MM / I	DD / YYYY
	•					

Case 17-3 Debtor 1 <u>Lisa M Sady</u>	1030 Doc 1	Filed 12/11/17 Document	Entered 12/11 Page 7 of 49	L/17 10:10:17 Case number (if known	Desc Main	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, for which the person i and, in a cass in which	12, or 13 of title 11, Un s eligible. I also certify h § 707(b)(4)(D) appliene petition is incorrect for Debtor 82820	s petition, declare that I ited States Code, and I that I have delivered to es, certify that I have no	ave explained the relie the debtor(s) the notic knowledge after an inc	ef available under e ce required by 11 U	ach chapter I.S.C. § 342(b)
	AGAWAM, MA 010 Number, Street, City, State 8					
	Contact phone 282820 Bar number & State		Email addr			

		Docume	ent Page 8 of 49	
Fill in this infor	mation to identify your	case:		
Debtor 1	Lisa M Sady			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MASSAC	CHUSETTS	
Case number				
(if known)				☐ Check if this is an
				amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
rai	Summarize Four Assets	Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	149,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	28,381.46
	1c. Copy line 63, Total of all property on Schedule A/B	\$	177,381.46
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	218,562.92
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	20,286.46
	Your total liabilities	\$	238,849.38
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,569.30
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,563.39
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 9 of 49 Case number (if known) Debtor 1 Lisa M Sady

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

3,686.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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ŦIII	in this info	ormation to i	identify	your case and			F 80E 10 01 43				
Deb	otor 1	Lisa N	/I Sady		ddle Name		Last Name				
	otor 2 ouse, if filing)	First Nam			ddle Name		Last Name				
Uni	ted States I	Bankruptcy C	Court for	the: DISTRIC	T OF MAS	SSACHUSETT	ΓS				
Cas	se number						-				Check if this is an amended filing
_		orm 10		operty							12/15
n ea hink nfor ansv	ch category tit fits best. mation. If m wer every qu	r, separately li Be as compl ore space is r estion.	st and dete and a	escribe items. Li accurate as poss attach a separate	ible. If two sheet to the	married people his form. On the	an asset fits in more than one of a are filing together, both are educated to any additional pages,	qually respons	ible for su	oplyii	ng correct
- air	Descri	be Each Resid	ierice, bi	uliding, Land, or	Other Real	Estate fou Ow	vn or Have an Interest In				
. D	o you own o	r have any le	gal or eq	uitable interest in	n any resid	ence, building,	land, or similar property?				
	No. Go to F	Part 2.									
	Yes. When	e is the proper	ty?								
1.1	20 North	n Boulevar	d		What		/? Check all that apply				
		ss, if available, or		cription	_	Single-family h					r exemptions. Put ns on Schedule D:
						Creditors  — Condominium or cooperative		Creditors Who	rs Who Have Claims Secured by Property.		
	West Sp	oringfield	MA	01089-0000		Manufactured Land	or mobile home	Current value entire propert			rent value of the tion you own?
	City		State	ZIP Code		Investment pro	operty	\$149,	00.00		\$149,000.00
						Timeshare Other					wnership interest
					_		in the property? Check one	a life estate), i		ilicy i	by the entireties, or
						Debtor 1 only		Fee simple	!		
	Hampde	en			_ □	Debtor 2 only					
	County					Debtor 1 and I	•			muni	ty property
					Othe		f the debtors and another ou wish to add about this item	(see instruc	tions)		
						erty identification		, cuon us local			
					Mar	ket value - S	Sale price.				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$149,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

	Case 17-31030 Doc	1 Filed 12/11/17 Document	Entered 12/11/2	17 10:10:17 D	esc Main
Debtor 1	Lisa M Sady	Document	Page 11 of 49	e number (if known)	
3. Cars, va	ans, trucks, tractors, sport utility ve	ehicles, motorcycles			
□ No					
■ Yes					
. 00					
3.1 Mak	ke: Toyota	Who has an interest in th	e property? Check one		claims or exemptions. Put red claims on Schedule D:
Mod	del: Rav4	Debtor 1 only			aims Secured by Property.
Yea		Debtor 2 only		Current value of the	Current value of the
	proximate mileage: 8700	Debtor 1 and Debtor 2	•	entire property?	portion you own?
	er information: sic package - in good	At least one of the debt	ors and another		
cor	ndition w 1 dent - KBB vate sale value	Check if this is comm (see instructions)	unity property	\$19,065.00	\$19,065.00
.pages	e dollar value of the portion you ov you have attached for Part 2. Write escribe Your Personal and Household I	that number here			\$19,065.00
	wn or have any legal or equitable in	nterest in any of the follow	ring items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Examp</i> □ No	nold goods and furnishings les: Major appliances, furniture, linens	s, china, kitchenware			
Yes.	Describe				
	15 yo and olde	r washer, dryer, stove/o	oven, refrigerator		\$500.00
	9 YO Sofa; 9 yo - tag sale value	o recliner and various l	amps and 16 YO kitch	en table	\$400.00
□ No	nics les: Televisions and radios; audio, vice including cell phones, cameras, response to the company of the co		oment; computers, printers	, scanners; music collec	tions; electronic devices
	2 YO 32# Telev	ision			\$75.00
	Samsung 4YO	tablet			\$35.00
Examp  ■ No	ibles of value les: Antiques and figurines; paintings, other collections, memorabilia, co		oks, pictures, or other art c	bbjects; stamp, coin, or b	aseball card collections;

Official Form 106A/B Schedule A/B: Property page 2

Document Page 12 of 49 , Case number *(if known)* Debtor 1 Lisa M Sady 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$350.00 clothing, outerwear, footwear and accessories 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$250.00 wedding bands (3) with 1/8 carat diamond 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... 2 cats Unknown 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,610.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes..... Cash \$200.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes.....

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Doc 1

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Desc Main

Debtor 1	Lisa M Sady	,	Docu	Iment Page 13 of 49 Case number (if k	nown)
		17.1.	Checking Account	United Bank	\$574.26
		17.2.	Savings	United Bank	\$375.33
		17.3.	Joint simple-e Savings account with daughter	United Bank	\$100.32
Exam ■ No			cly traded stocks ent accounts with brokera	ge firms, money market accounts	
19. <b>Non-p</b>		ock and	interests in incorporate	d and unincorporated businesses, including an ir	nterest in an LLC, partnership, and
	Give specific inf		about them	% of ownership:	
Negot	tiable instruments	include ¡	personal checks, cashiers	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
☐ Yes.	Give specific info		about them uer name:		
<i>Exam</i> □ No		IRA, ERI	SA, Keogh, 401(k), 403(b)	, thrift savings accounts, or other pension or profit-sh	aring plans
■ Yes.	List each accour		tely. of account:	Institution name:	
		401(I	<b>&lt;</b> )	Fidelity 401k Savings Plan (A) through employer - current value	\$6,456.55
Your s Exam		d deposi	ts you have made so that	you may continue service or use from a company a trilities (electric, gas, water), telecommunications co	ompanies, or others
■ No □ Yes.				Institution name or individual:	
23. <b>Annui</b> <b>N</b> o	ties (A contract fo	or a perio	dic payment of money to	rou, either for life or for a number of years)	
☐ Yes.	ls	suer nam	ne and description.		
26 U.S.	ets in an education .C. §§ 530(b)(1),			ed ABLE program, or under a qualified state tuition	on program.
■ No □ Yes.	In	stitution i	name and description. Sep	parately file the records of any interests.11 U.S.C. § 5	i21(c):
■ No				han anything listed in line 1), and rights or powe	rs exercisable for your benefit
	Give specific inf				
			ss, trade secrets, and otles, websites, proceeds fro	ner intellectual property m royalties and licensing agreements	
	Give specific inf	ormation	about them		

		Case	17-31030	Doc 1	Filed 12/11/17 Document	Entered 12/11/17 10:10:17 Page 14 of 49	Desc Main
D	ebtor 1	Lisa M	Sady		Document	Case number (if known)	
27.	Exam ■ No	<i>ples:</i> Buildi	nises, and other ing permits, excl	usive licenses	ngibles , cooperative association	n holdings, liquor licenses, professional licens	es
М	onev or	property (	owed to you?				Current value of the
	ooy	property					portion you own?  Do not deduct secured claims or exemptions.
28.	. Tax re ■ No	funds owe	ed to you				
	_	. Give spec	ific information a	about them, inc	cluding whether you alre	ady filed the returns and the tax years	
29.	Exam	•	due or lump sum	,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.	Exam	<i>ples:</i> Unpa bene	someone owes id wages, disabi fits; unpaid loans cific information.	lity insurance page to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
				•			
31.			rance policies h, disability, or li	fe insurance; h	nealth savings account (	HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes.	. Name the		eany of each ponpany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you some	are the be one has die	neficiary of a livi	ng trust, expec	someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rec	eive property because
33.	Exam ■ No	<i>ples:</i> Accid		nt disputes, in	you have filed a lawsu surance claims, or rights	it or made a demand for payment s to sue	
34.	■ No		t and unliquida		every nature, includin	g counterclaims of the debtor and rights to	set off claims
35.	. <b>Any fi</b> i ■ No	nancial as	sets you did no	t already list			
	☐ Yes.	. Give spec	cific information.				
36					om Part 4, including a	ny entries for pages you have attached	\$7,706.46
Pa	art 5: De	escribe Any	Business-Relate	d Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37.	Do you	own or hav	e any legal or equ	uitable interest	in any business-related p	roperty?	
	_	o to Part 6.	, <u>5</u>		,		
	☐ Yes.	Go to line 38	<b>3</b> .				

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Case number (if known) Document Debtor 1 Lisa M Sady Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$149,000.00 Part 2: Total vehicles, line 5 \$19.065.00 57. Part 3: Total personal and household items, line 15 \$1,610.00 Part 4: Total financial assets, line 36 58. \$7,706.46 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$28,381.46 Copy personal property total \$28,381.46

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$177,381.46

Fill in this information to identify your case:
Debtor 1 Lisa M Sady
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS
Casa sumban
Case number (if known)
(- · · · · · · · · · · · · · · · · · · ·

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty You	u Claim a	s Exempt
---------	----------	-----------	-----------	-----------	----------

You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	the Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
20 North Boulevard West Springfield, MA 01089 Hampden County	\$149,000.00		\$23,675.00	11 U.S.C. § 522(d)(1)
Market value - Sale price. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2017 Toyota Rav4 8700 miles Basic package - in good condition w	\$19,065.00		\$3,775.00	11 U.S.C. § 522(d)(2)
1 dent - KBB private sale value Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
15 yo and older washer, dryer, stove/oven, refrigerator	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
9 YO Sofa; 9 yo recliner and various lamps and 16 YO kitchen table - tag	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
sale value Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
2 YO 32# Television Line from Schedule A/B: 7.1	\$75.00		\$75.00	11 U.S.C. § 522(d)(3)
LINE HOITI SCHEUUIE A/D. 1.1			100% of fair market value, up to any applicable statutory limit	

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Sa M Sady Case number (if known)

Denioi	LISA IVI SAUY				
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	amsung 4YO tablet ne from Schedule A/B: 7.2	\$35.00		\$35.00	11 U.S.C. § 522(d)(3)
LI	THE HOLLI SCHEDULE AV.B. 1.2			100% of fair market value, up to any applicable statutory limit	
	othing, outerwear, footwear and	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)
Li	ne from <i>Schedule A/B</i> : <b>11.1</b>			100% of fair market value, up to any applicable statutory limit	
	edding bands (3) with 1/8 carat	\$250.00		\$250.00	11 U.S.C. § 522(d)(4)
	ne from Schedule A/B: <b>12.1</b>			100% of fair market value, up to any applicable statutory limit	
_	ash ne from <i>Schedule A/B</i> : <b>16.1</b>	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
LI	The Hoth Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	
	hecking Account: United Bank	\$574.26		\$574.26	11 U.S.C. § 522(d)(5)
LII	THE HOLLI SCHEdule AV.B. 17.1			100% of fair market value, up to any applicable statutory limit	
	avings: United Bank	\$375.33		\$375.33	11 U.S.C. § 522(d)(5)
LI	THE HOLLI SCHEDULE AV.B. 11.2			100% of fair market value, up to any applicable statutory limit	
	pint simple-e Savings account with aughter: United Bank	\$100.32		\$100.32	11 U.S.C. § 522(d)(5)
	ne from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	01(k): Fidelity 401k Savings Plan (A) brough employer - current value	\$6,456.55		\$6,456.55	11 U.S.C. § 522(d)(12)
	ne from Schedule A/B: <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covere No	3 years after that for ca	ises fi	·	,

			Document	Page 1	8 of 49		
Fill i	n this inform	ation to identify you	ır case:				
Debt	tor 1	Lisa M Sady					
Dobi	101 1	First Name	Middle Name	Last Name			
Debt	tor 2						
(Spou	ise if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ban	kruptcy Court for the:	DISTRICT OF MASSACHUSE	TTS			
Case	e number						
(if kno						☐ Check	if this is an
						amend	led filing
Offi	cial Form	<u>106D</u>					
Scl	hedule [	D: Creditors	Who Have Claims	Secure	ed by Property	y	12/15
Re as	complete and	accurate as nossible	If two married people are filing togeth	ner hoth are e	equally responsible for su	unnlying correct informa	tion If more snace
is nee	eded, copy the		out, number the entries, and attach it				
	er (if known).						
	_	nave claims secured by					
L	☐ No. Check to	this box and submit th	his form to the court with your other	schedules.	You have nothing else to	o report on this form.	
	Yes. Fill in	all of the information	below.				
Part	1: List All	Secured Claims					
2. Lis	st all secured c	laims. If a creditor has r	more than one secured claim, list the cre	editor separate	ely Column A	Column B	Column C
			a particular claim, list the other creditor cal order according to the creditor's nam		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
muci	1 as possible, lis	t the claims in alphabeti	cal order according to the creditor's flair	ic.	value of collateral.	claim	If any
2.1	ditech Fina	ancial, LLC	Describe the property that secures	the claim:	<u>\$177,443.81</u>	\$149,000.00	\$28,443.81
	Creditor's Name		20 North Boulevard West				
			Springfield, MA 01089 Ham	paen			
	D.O. D	454	County Market value - Sale price.				
	P.O. Box 6 Rapid City	-	As of the date you file, the claim is:	Check all that			
	57709-6154		apply.  Contingent				
		City, State & Zip Code	☐ Unliquidated				
	riambor, onco,	ony, chaic a zip coac	☐ Disputed				
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
<b>■</b> D	ebtor 1 only		☐ An agreement you made (such as	mortgage or s	ecured		
□ D	ebtor 2 only		car loan)				
$\square$ D	ebtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
	t least one of the	e debtors and another	☐ Judgment lien from a lawsuit				
	heck if this cla		Other (including a right to offset)	Mortgage			
C	community deb	t					
Date	debt was incui	rred 4/22/2013	Last 4 digits of account num	ber <u>4400</u>	<u> </u>		
2.2	Toyota Fin	ancial			\$41,119.11	\$19,065.00	\$22,054.11
	Services Creditor's Name		Describe the property that secures		Ψ41,113.11	Ψ19,003.00	Ψ22,034.11
	Orealter 5 Hame		2017 Toyota Rav4 8700 mile Basic package - in good co				
	P.O. Box 8	026	1 dent - KBB private sale va				
	Cedar Rap		As of the date you file, the claim is:				
	52409-8026	•	apply.  Contingent				
	Number, Street, 0	City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
<b>■</b> D	ebtor 1 only		☐ An agreement you made (such as	mortgage or s	ecured		
□ D	ebtor 2 only		car loan)				
	ebtor 1 and Deb	•	☐ Statutory lien (such as tax lien, me	chanic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit	A	0 11-	form late 1	
	heck if this cla community deb		Other (including a right to offset)		& rollover balance I to Toyota)	from late husband	s vehicle

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Debtor	1 Lisa M Sady			Case number (if know)
	First Name	Middle Name	Last Name	
Date del	ot was incurred	Las	st 4 digits of account number	
Add th	e dollar value of your	entries in Column A on	this page. Write that number h	here: \$218,562.92
	is the last page of you that number here:	r form, add the dollar v	alue totals from all pages.	\$218,562.92
Part 2:	List Others to Be	Notified for a Debt T	hat You Already Listed	
trying to	collect from you for a	debt you owe to some e debts that you listed i	one else, list the creditor in Pa	bbt that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more editors here. If you do not have additional persons to be notified for any
$\square$ N	lame, Number, Street, C	City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.2
Т	oyota Financial S	Services		,
Α	Asset Protection I	Department		Last 4 digits of account number 3420
F	P.O. Box 2958			
T	orrance, CA 9050	9-2958		

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		Document Pa	ae 20 of 49	
Fill in	this information to identify your ca		(N. 7 () ()) 43	
Debto				
Debio	First Name	Middle Name Last	Name	
Debto	r 2			
Spouse	e if, filing) First Name	Middle Name Last	Name	
Unite	States Bankruptcy Court for the:	DISTRICT OF MASSACHUSETTS		
_				
Case (if know	number n)			☐ Check if this is an
,	-7			amended filing
<u>Offic</u>	ial Form 106E/F			
3ch	edule E/F: Creditors WI	no Have Unsecured Clai	ms	12/15
chedu eft. Att	lle D: Creditors Who Have Claims Secu		l, copy the Part you need, fill it o	ly secured claims that are listed in ut, number the entries in the boxes on the top of any additional pages, write your
Part 1	List All of Your PRIORITY Uns	secured Claims		
I. Do	any creditors have priority unsecured	claims against you?		
	No. Go to Part 2.			
	Yes.			
Part 2	List All of Your NONPRIORITY	Unsecured Claims		
	any creditors have nonpriority unsecu			
3. Do			her schedules.	
3. Do	No. You have nothing to report in this pa	red claims against you?	her schedules.	
3. Do	No. You have nothing to report in this parties.	red claims against you? rt. Submit this form to the court with your ot		
3. Do	No. You have nothing to report in this paragraph Yes.  st all of your nonpriority unsecured claisecured claim, list the creditor separately	red claims against you?	tor who holds each claim. If a cre y what type of claim it is. Do not lis	t claims already included in Part 1. If more
3. Do	No. You have nothing to report in this paragraph.  Yes.  st all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, lis	rt. Submit this form to the court with your ot ims in the alphabetical order of the credi for each claim. For each claim listed, identif	tor who holds each claim. If a cre y what type of claim it is. Do not lis	t claims already included in Part 1. If more
4. Liun that Pa	No. You have nothing to report in this paragraph Yes.  st all of your nonpriority unsecured claims, list the creditor separately an one creditor holds a particular claim, list to 2.	rt. Submit this form to the court with your ot ims in the alphabetical order of the credi for each claim. For each claim listed, identif	tor who holds each claim. If a cre ry what type of claim it is. Do not lis ore than three nonpriority unsecure	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	No. You have nothing to report in this paragraph.  Yes.  st all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, lis	rt. Submit this form to the court with your ot ims in the alphabetical order of the credit for each claim. For each claim listed, identifit the other creditors in Part 3.If you have more	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecure umber	t claims already included in Part 1. If more d claims fill out the Continuation Page of
4. Liun that Pa	No. You have nothing to report in this paragraph Yes.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list to 2.  American Express Nonpriority Creditor's Name Po Box 297871	rt. Submit this form to the court with your ot ims in the alphabetical order of the credit for each claim. For each claim listed, identifit the other creditors in Part 3.If you have more	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecured umber	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	No. You have nothing to report in this parties.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list to 2.  American Express  Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329	rt. Submit this form to the court with your of ims in the alphabetical order of the credifor each claim. For each claim listed, identif the other creditors in Part 3.If you have mediated the count of the creditors in Part 3. If you have mediated the count of the count of the creditors in Part 3. If you have mediated the count of	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecure number 1007  8/2016	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	No. You have nothing to report in this paragraph Yes.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list to 2.  American Express Nonpriority Creditor's Name Po Box 297871	rt. Submit this form to the court with your of ims in the alphabetical order of the credifor each claim. For each claim listed, identif the other creditors in Part 3.If you have mediated the count of the creditors in Part 3. If you have mediated the count of the creditors in Part 3. If you have mediated the creditors in Part 3. If you have mediated the count of the creditors in Part 3. If you have mediated the count of the creditors in Part 3. If you have mediated the count of the creditors in Part 3. If you have mediated the count of the credit of the	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecure umber	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
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4. Liun that Pa	No. You have nothing to report in this parties.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately and creditor separat	rt. Submit this form to the court with your of times in the alphabetical order of the credifor each claim. For each claim listed, identifit the other creditors in Part 3.If you have mediated to the creditors in Part 3.If you have mediated the other creditors in Part 3.If you have 3.If you hav	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecure number 1007  8/2016	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	No. You have nothing to report in this parties.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list to 2.  American Express Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	rt. Submit this form to the court with your of ims in the alphabetical order of the credifor each claim. For each claim listed, identif the other creditors in Part 3.If you have mediated.  Last 4 digits of account now the was the debt incurred.  As of the date you file, the Contingent  Unliquidated	tor who holds each claim. If a creaty what type of claim it is. Do not listore than three nonpriority unsecure number 1007  8/2016	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	Yes.  st all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list t2.  American Express Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	rt. Submit this form to the court with your otings in the alphabetical order of the credit for each claim. For each claim listed, identifit the other creditors in Part 3.If you have mediated the other creditors	tor who holds each claim. If a cre'y what type of claim it is. Do not listore than three nonpriority unsecure umber 1007 ed? 8/2016 e claim is: Check all that apply	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	No. You have nothing to report in this parties.  Stall of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the creditor is nonpriority Creditor's Name  Po Box 297871  Fort Lauderdale, FL 33329  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another controls.	rt. Submit this form to the court with your of the credit for each claim. For each claim listed, identifit the other creditors in Part 3.If you have me Last 4 digits of account now When was the debt incurror As of the date you file, the Contingent Unliquidated Disputed  Type of NONPRIORITY un	tor who holds each claim. If a cre'y what type of claim it is. Do not listore than three nonpriority unsecure umber 1007 ed? 8/2016 e claim is: Check all that apply	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim
4. Liun that Pa	Yes.  st all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list t2.  American Express Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	rt. Submit this form to the court with your of the submit this form to the court with your of times in the alphabetical order of the credifor each claim. For each claim listed, identifit the other creditors in Part 3.If you have me Last 4 digits of account now When was the debt incurred As of the date you file, the Contingent Unliquidated Disputed  Type of NONPRIORITY under to Student loans	tor who holds each claim. If a cre'y what type of claim it is. Do not listore than three nonpriority unsecure umber 1007 ed? 8/2016 e claim is: Check all that apply	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim  \$2,127.19
3. Do	No. You have nothing to report in this parties.  It all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list the creditor separately an one creditor holds a particular claim, list the concept of the claim of the creditor separately and one creditor holds a particular claim, list the claim secured claim, list the clai	rt. Submit this form to the court with your of the credition in the alphabetical order of the credition each claim. For each claim listed, identifit the other creditors in Part 3.If you have me Last 4 digits of account now When was the debt incurror As of the date you file, the Contingent Unliquidated Disputed  Type of NONPRIORITY unliquity  Student loans Obligations arising out o report as priority claims	tor who holds each claim. If a cre y what type of claim it is. Do not lis ore than three nonpriority unsecure  umber 1007  ed? 8/2016  e claim is: Check all that apply  secured claim:  f a separation agreement or divorce	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim  \$2,127.19  e that you did not
3. Do	Yes.  st all of your nonpriority unsecured clais secured claim, list the creditor separately an one creditor holds a particular claim, list t2.  American Express Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and anot Check if this claim is for a comm debt	rt. Submit this form to the court with your of the credition in the alphabetical order of the credition each claim. For each claim listed, identifit the other creditors in Part 3.If you have me Last 4 digits of account now When was the debt incurror As of the date you file, the Contingent Unliquidated Disputed  Type of NONPRIORITY unliquity  Student loans Obligations arising out o report as priority claims	tor who holds each claim. If a cre y what type of claim it is. Do not lis ore than three nonpriority unsecure  umber 1007  ed? 8/2016  e claim is: Check all that apply  secured claim:  f a separation agreement or divorce it-sharing plans, and other similar of	t claims already included in Part 1. If more d claims fill out the Continuation Page of  Total claim  \$2,127.19  e that you did not

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Jebioi	Lisa W Sady		Case number (if know)	
4.2	Capital One USA NA	Last 4 digits of account number	6242	\$126.00
	Nonpriority Creditor's Name P.O. Box 30281	When was the debt incurred?	Revolving account	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I Debt	
4.3	Carter Business Service, Inc.	Last 4 digits of account number	0528	\$77.00
	Nonpriority Creditor's Name 150A Andover Street, Suite 12A Danvers, MA 01923	When was the debt incurred?	3/24/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Group	Agency - Riverbend Medical	
1.4	Chase - Cardmember SErvice	Last 4 digits of account number	8599	\$2,576.72
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?	revolving	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other, Specify Credit Card	I Debt	

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Case number (if know)

LISA W Sady	Case number (if know)	
COMCAST	Last 4 digits of account number 6320	\$314.05
Nonpriority Creditor's Name 676 Island Pond Road Manager NH 03100 4840	When was the debt incurred? 7/17/17	
Manchester, NH 03109-4840  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify disconnected;	
Comenity Bank	Last 4 digits of account number 0656	\$1,284.07
Nonpriority Creditor's Name  Bankruptcy Department  P.O. Box 182125	When was the debt incurred? Revolving charge	
Columbus, OH 43218-2125	_	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card - Lane Bryant	
Comenity Bank	Last 4 digits of account number 3019	\$1,181.00
Nonpriority Creditor's Name Bankruptcy Department P.O. Box 182125	When was the debt incurred? 3/2015	
Columbus, OH 43218-2125		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Credit Card debt - Zales Jewelers	

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Deb	tor 1 Lisa M Sady	Case number (if know)				
4.8	Country Door	Last 4 digits of account number 6125	\$866.00			
	Nonpriority Creditor's Name 1515 S 21st St.	When was the debt incurred? 3/2015				
	Clinton, IA 52732  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit account - Chargeoff				
4.9	Discover Card Nonpriority Creditor's Name	Last 4 digits of account number	\$2,270.63			
	Bankruptcy Department PO BOX 30943	When was the debt incurred? revolving credit				
	Salt Lake City, UT 84130					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify				
4.1 0	Ginny's	Last 4 digits of account number 6125	\$339.00			
<u> </u>	Nonpriority Creditor's Name 1515 S 21st Street	When was the debt incurred? 7/2016	·			
	Monroe, WI 53566-1364					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans				
	debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify Charge account - WRITTEN OFF				
	03	- Other, Specify Strange account With Lit Off				

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Case number (if know)

Debto	Lisa M Sady		Case number (if know)				
4.1	Merrick Bank Corp	Last 4 digits of account number	3676	\$3,894.87			
	Nonpriority Creditor's Name P.O. Box 9201 Old Bothpage, NV 11804-9001	When was the debt incurred?	revolving credit				
	Old Bethpage, NY 11804-9001  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	• ,	,				
	Debtor 1 only						
	Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Credit Card	d Debt				
4.1	Seventh Avenue	Lord B. Royal Control of Control	6125	\$396.00			
2	Nonpriority Creditor's Name	Last 4 digits of account number		φ390.00			
	1515 S 21st Street Monroe, WI 53566-1364	When was the debt incurred?	7/2016				
	Number Street City State Zlp Code						
	Who incurred the debt? Check one.						
	■ Debtor 1 only □ Contingent						
	Debtor 2 only	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Diligations ansing out of a separation agreement of divorce that you did not					
	No	Debts to pension or profit-sharin	ng plans, and other similar debts				
	■ No		count - Charge off and then				
	Yes		- bal after settlement pmt in				
4.1	Synchrony Bank		5354	\$2,257.31			
3	Nonpriority Creditor's Name	Last 4 digits of account number		\$2,237.31			
	Attn: Bankruptcy Department P.O. Box 965060	When was the debt incurred?	revolving credit				
	Orlando, FL 32896-5060  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	Пол					
		☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure					
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	aradori agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes ☐ Other Specify Credit Card Debt - Amazon.com						

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Debt	or 1 Lisa M Sady		Case number (if know)					
4.1 4	Synchrony Bank	Last 4 digits of account number	5464	\$329.08				
,	Nonpriority Creditor's Name Attn: Bankruptcy Department P.O. Box 965060 Orlando, FL 32896-5060	When was the debt incurred?	revolving credit					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	_						
	Debtor 1 only	Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	,					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Credit Card	Debt - "R" Us Credit Card					
4.1 5	Synchrony Bank	Last 4 digits of account number	7728	\$1,381.54				
	Nonpriority Creditor's Name Attn: Bankruptcy Department P.O. Box 965060	When was the debt incurred?	revolving credit					
	Orlando, FL 32896-5060  Number Street City State Zlp Code	As of the date you file, the claim						
	Who incurred the debt? Check one.	_						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community		Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	l Debt - Walmart Credit Card					
4.1 6	Through the Country Door	Last 4 digits of account number	6125	\$866.00				
	Nonpriority Creditor's Name 1515 S 21st Street Monroe, WI 53566-1364	When was the debt incurred?	12/2014					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	Student loans						
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	■ Other. Specify Charge acc	count - WRITTEN OFF					

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Lisa W Sady		Case number (ii know)		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
Central Credit Services LLC	Line <b>4.15</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims		
9550 Regency Square Blvd, Suite 500		Part 2: Creditors with Nonpriority Unsecured Claims		
Jacksonville, FL 32225-8169	Last 4 digits of account number	5521		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
EGS Financial Care, Inc.	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
4740 Baxter Road		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Virginia Beach, VA 23462	Last 4 digits of account number	2232		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
EGS Financial Care, Inc.	Line <b>4.14</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
4740 Baxter Road Virginia Beach, VA 23462		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Vilginia Bodon, VA 20402	Last 4 digits of account number	8470		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
GC Services Limited Partnership	Line <b>4.1</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
Collection Agency Division 6330 Gulfton Houston, TX 77081		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	0309		

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,286.46
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 20,286.46

Fill in this information to identify your case:  Debtor 1  Lisa M Sady  First Name Middle Name Last Name
First Name Middle Name Lost Name
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS
Case number
(if known)

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Number   Street   Street   ZIP Code		Person or	r company with Name, Numbe	whom you have the	contract or lease	State what the contract or lease is for
Number         Street           City         State         ZIP Code           2.2         Name         Number         Street           City         State         ZIP Code           2.3         Name         City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street	2.1					
City         State         ZIP Code           2.2         Name         Number         Street           City         State         ZIP Code           2.3         Name         City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street		Name				_
Number   Street   State   ZIP Code		Number	Street			
Number Street  City State ZIP Code  2.3  Name  Number Street  City State ZIP Code  2.4  Name  Number Street  City State ZIP Code  2.5  Name  Number Street		City		State	ZIP Code	<del>_</del>
Number         Street           City         State         ZIP Code           2.3         Name         Number         Street           City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street           Number         Street         Street	2.2					
City         State         ZIP Code           2.3         Name         Number         Street           City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street		Name				
2.3   Name   Number   Street   State   ZIP Code    2.4   Name   Number   Street   State   ZIP Code    2.5   Name   Name   Street   State   ZIP Code    2.5   Name   Name   Street   Street   State   ZIP Code    2.6   Name   Street   Street		Number	Street			
2.3   Name   Number   Street   State   ZIP Code    2.4   Name   Number   Street   State   ZIP Code    2.5   Name   Name   Street   State   ZIP Code    2.5   Name   Name   Street   Street   State   ZIP Code    2.6   Name   Street   Street		City		State	7ID Codo	_
Number Street  City State ZIP Code  2.4  Name  Number Street  City State ZIP Code  2.5  Name  Number Street  Street  Number Street	2.3	City		State	ZIF Code	
City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street		Name				_
2.4   Name   Number   Street   State   ZIP Code		Number	Street			
2.4   Name   Number   Street   State   ZIP Code		City		State	ZIP Code	<u> </u>
Number Street  City State ZIP Code  2.5  Name  Number Street	2.4					
City         State         ZIP Code           2.5         Name           Number         Street		Name				_
2.5 Name Number Street		Number	Street			
2.5 Name Number Street		City		State	ZIP Code	<u> </u>
Number Street	2.5					
		Name				_
		Number	Stroot			_
City State ZIP Code			Succi			
		City		State	ZIP Code	<del>_</del>

		Docume	<u>nt Page 28 (</u>	ot 49	
Fill in thi	s information to identify you	r case:			
Debtor 1	Lies M Cody				
Deploi	Lisa M Sady First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	DISTRICT OF MASSAC	HUSETTS		
_					
Case nur (if known)	nber				☐ Check if this is an
(ii kilowii)					☐ Check if this is an amended filing
					amonada iimig
Officia	al Form 106H				
	dule H: Your Cod	lohtoro			40/45
Sche	dule H. Your Cot	iebtors			12/15
1. Do	es  ithin the last 8 years, have your and continued the last 8 years, have your and 2 years, hav	you are filing a joint case, on lived in a community property of the property	operty state or territo erto Rico, Texas, Wash with you at the time?	ry? (Community property iington, and Wisconsin.) r if your spouse is filing	v states and territories include g with you. List the person shown le creditor on Schedule D (Official
Form					Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor				ditor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedule	s that apply:
3.1				☐ Schedule D, line	
0.1	Name			□ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
	Oity	Ciale	Zii Code		
3.2				☐ Schedule D, line	<b>a</b>
0.2	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	
					<u> </u>
	Number Street City	State	ZIP Code		
	Only	Jiaio	Zii- Coue		

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	:						1				
	in this information to identify your countries to a Lisa M Sady										
Del	btor 2					_					
	ouse, if filing) ited States Bankruptcy Court for the	· DISTRICT OF MASS	ACHUSET	TS							
		. DISTRICT OF WASSA	-CI IOOL I	10		_	Chaol	cif this is:			
	se number nown)		-					n amende			
							ПΑ	suppleme	ent showing as of the fol		
0	fficial Form 106I						M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome									12/15
atta	use. If you are separated and you che a separate sheet to this form.  It 1: Describe Employment  Fill in your employment		onal page	es, write you				mber (if I	known). An	nswer ever	y question
	information.		Debtor	-				_	or non-fili	ng spouse	
	If you have more than one job, attach a separate page with	Employment status	Employed				☐ Employed ☐ Not employed				
	information about additional employers.	☐ Not emplo			d			□ Not e	mployed		
		Occupation	Transportation Rep 3								
	Include part-time, seasonal, or self-employed work.	Employer's name	C&S V	holesale	Grocer	s					
	Occupation may include student or homemaker, if it applies.	Employer's address		orate Driv , NH 0343							
		How long employed to	here?	17 Years	S			_			
Pai	rt 2: Give Details About Mor	nthly Income									
spo	imate monthly income as of the duse unless you are separated.					•				·	-
	ou or your non-filing spouse have meet space, attach a separate sheet to		ombine the	information	for all e	emplo	oyers for t	nat perso	on the line	es below. If	you need
							For Deb	tor 1	For Deb	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	3,	385.42	\$	N/A	_
3.	Estimate and list monthly overt	ime pay.			3.	+\$		198.60	+\$	N/A	-

3,584.02

N/A

Calculate gross Income. Add line 2 + line 3.

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Copy line 4 here 4. \$ 3,584.02  5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	For Deb non-filir	
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$ 204.9  5d. Required repayments of retirement fund loans 5d. \$ 0.00  5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00  5g. Union dues 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,266.75  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm		<del></del>
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 5g. Union dues 5h. Other deductions. Specify: 5h. \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,266.75 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,317.36 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	<u>Ζ</u> Ψ	N/A
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm		
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Sequired repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. Sp. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,317.3i  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	2 \$	N/A
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	0 \$	N/A
5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5g. Calculate total monthly take-home pay. Subtract line 6 from line 4. 5g. \$ 0.00 5g. \$ 0.00 5g. \$ 0.00 5h. \$ 0.0		N/A
5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 5f. \$0.00 5g. \$0.00 5h. Other deductions. Specify: 5h. \$0.00 5h. \$0.		N/A
5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5g+5h. 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5		N/A
5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm		N/A N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,266.75  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm		N/A N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,317.30  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm		N/A
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	<u> </u>	N/A
8a. Net income from rental property and from operating a business, profession, or farm	υ Ψ	IN/A
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		
monthly net income. 8a. \$ 0.0	_	N/A
8b. Interest and dividends 8b. \$ 0.0	<u>0</u> \$	N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.0	<b>o</b> \$	N/A
8d. Unemployment compensation 8d. \$ 0.0	<u> </u>	N/A
8e. Social Security 8e. \$ 0.0	<u> </u>	N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: SS Survivor benefits for adopted daughter (niece)  8f. \$ 1,252.00		N/A
8g. Pension or retirement income 8g. \$ 0.00 8h. Other monthly income. Specify: 8h.+ \$ 0.00	<u>0</u>	N/A N/A
on. Other monthly income. Specify.	<u> </u>	IN/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0 \$	N/A
10. <b>Calculate monthly income.</b> Add line 7 + line 9.	\$ N	I/A = \$ 3,569.3
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roomma other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses Specify:	listed in Sche	dule J. 11. +\$ 0.0
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthl Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related D applies	ata, if it	12. \$ 3,569.3 Combined
13. Do you expect an increase or decrease within the year after you file this form?  No.		monthly income

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify	your case:				
Deb	otor 1 Lisa M Sad	v		Che	eck if this is:	
	otor 2 ouse, if filing)				An amended filing A supplement show 13 expenses as of	wing postpetition chapter
``	,	DISTRICT OF MASSAC	NULCETTO			
Unit	ted States Bankruptcy Court for th	e: DISTRICT OF MASSAC	HUSETTS	_	MM / DD / YYYY	
	se number nown)					
	fficial Form 106J					
	chedule J: Your	•				12/15
info	as complete and accurate a ormation. If more space is n mber (if known). Answer evo	eeded, attach another she				
Par	Describe Your Hous Is this a joint case?	sehold				
	■ No. Go to line 2.  □ Yes. <b>Does Debtor 2 live</b>	in a separate household?				
	☐ No ☐ Yes. Debtor 2 mi	ust file Official Form 106J-2,	Expenses for Separate	Household of Del	otor 2.	
2.	Do you have dependents?	P □ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this inform each dependent.	-	s relationship to Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Daughter		13	■ Yes □ No
						☐ Yes
						□ No
						☐ Yes
						□ No
_						☐ Yes
3.	Do your expenses include expenses of people other yourself and your depend	than				
Est exp	t 2: Estimate Your Ongo timate your expenses as of penses as of a date after the plicable date.					
the	lude expenses paid for with value of such assistance a ficial Form 106I.)				Your exp	enses
4.	The rental or home owner payments and any rent for t	ship expenses for your real	sidence. Include first mo	rtgage 4.	\$	600.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	0.00
		r's, or renter's insurance		4b.	·	0.00
	• •	repair, and upkeep expense	3	4c.	\$	0.00
_		ation or condominium dues		4d.	·	0.00
5.	Additional mortgage payn	nents for your residence, s	uch as home equity loar	ıs 5.	\$	0.00

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btor 1 L	isa M Sady	Case numb	er (if known)	
Utilities	:			
	lectricity, heat, natural gas	6a.	\$	170.00
	/ater, sewer, garbage collection	6b.	·	26.50
	elephone, cell phone, Internet, satellite, and cable services	6c.	·	84.00
	ther. Specify:	6d.		0.00
	nd housekeeping supplies		\$	700.00
	re and children's education costs		\$	
			\$	0.00
	g, laundry, and dry cleaning		\$	138.00
	al care products and services		·	63.00
	and dental expenses	11.	\$	90.00
	ortation. Include gas, maintenance, bus or train fare. nclude car payments.	12.	\$	450.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
	ble contributions and religious donations	14.	·	0.00
Insuran	•	14.	Ψ	0.00
	<b>ce.</b> nclude insurance deducted from your pay or included in lines 4 or 2	Λ		
	fe insurance	o. 15a.	\$	0.00
	ealth insurance	15a.		0.00
	editrinsurance	15c.	·	182.70
	ther insurance. Specify:	15d.	·	0.00
	ther insurance, specify:  Do not include taxes deducted from your pay or included in lines 4 or		Ψ	0.00
Specify:			\$	0.00
	ent or lease payments:		Ψ	0.00
	ar payments for Vehicle 1	17a.	2	603.19
	ar payments for Vehicle 2	17a. 17b.	·	0.00
	• •	17b. 17c.		
	ther. Specify:		·	0.00
	ther. Specify:	17d.	Ф	0.00
	nyments of alimony, maintenance, and support that you did not		\$	0.00
	ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo ayments you make to support others who do not live with you.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	0.00
Specify:		19.	Ψ	0.00
	eal property expenses not included in lines 4 or 5 of this form of		ur Incomo	
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
		20c.	·	
	roperty, homeowner's, or renter's insurance	20d.		0.00
	aintenance, repair, and upkeep expenses		·	0.00
	omeowner's association or condominium dues	20e.	·	0.00
Other: S		21.	· · · · · · · · · · · · · · · · · · ·	13.00
Pet foc	od/veterinary services & care		+\$	93.00
cigaret			+\$	200.00
birthda	y & holiday gifts		+\$	100.00
Calcula	te vour monthly expenses			
	te your monthly expenses d lines 4 through 21.		\$	2 562 20
	<u> </u>	n 106 L 2	· · ·	3,563.39
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form	II IU0J-2	\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	3,563.39
Calcula	te your monthly net income.	L		
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,569.30
	opy your monthly expenses from line 22c above.	23a. 23b.		
23D. C	opy your monthly expenses from lifte 220 above.	230.	-ψ	3,563.39
23c S	ubtract your monthly expenses from your monthly income.			
	the result is your <i>monthly net income</i> .	23c.	\$	5.91
	·			
	expect an increase or decrease in your expenses within the ye			
	ple, do you expect to finish paying for your car loan within the year or do you ion to the terms of your mortgage?	expect your mortgage p	ayment to incr	ease or decrease because
modificat	ion to the terms of your mortgage?			
<b>-</b>				
■ No. □ Yes.	Explain here:			

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				•
Fill in this info	mation to identify your	case:		
Debtor 1	Lisa M Sady			
	First Name	Middle Name	Last Name	
Debtor 2				_
Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF MASSAC	HUSETTS	
Case number				·
if known)				Check if this is an amended filing
Official For	m 106Dec		•	
		n Individual	<b>Debtor's Schedules</b>	12/1!
two married p	eople are filing togethe	r, both are equally respo	nsible for supplying correct information	<b>1.</b> -
ou must file th	is form whenever you fi	le bankruptcy schedules	or amended schedules. Making a false	statement, concealing property, or
btaining mone	y or property by fraud in	n connection with a bank	ruptcy case can result in fines up to \$2	50,000, or imprisonment for up to 20
ears, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 3571.		,
Sig	n Below			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy form	s?
■ No				
☐ Yes.	Name of person		Attach	Bankruptcy Petition Preparer's Notice,
			Declar	ration, and Signature (Official Form 119
7	<b>\</b> \ \			
		that I have read the sum	mary and schedules filed with this decl	aration and
/ that they av	e true and correct.			
	Jua ///_	Sady	X	
Lisa M Signatu	Sady fre of Debtor 1		Signature of Debtor 2	
Olgilate	13/1/2016	1 /		
Date _	1411/20/	/	Date	
	1			

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Fill in	this informa	ation to identify you	r case:					
Debto		Lisa M Sady						
		First Name	Middle Name	Last Name				
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name				
United	States Ban	kruptcy Court for the:	DISTRICT OF MASSACI	HUSETTS				
		araptoy Court for the						
(if know	number				_	Check if this is an mended filing		
∩ffi∂	cial For	m 107						
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10		
inform	ation. If mo er (if known)	ore space is needed, . Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you			
		current marital statu						
	I Married ■ Not marri	ed						
2. D	ouring the last 3 years, have you lived anywhere other than where you live now?							
	<ul> <li>■ No</li> <li>□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>							
	Debtor 1 Prio	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there		
					ity property state or territor ico, Texas, Washington and V			
	No Yes. Mak	e sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).				
Part 2	Explain	the Sources of You	r Income					
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						ndar years?		
		n the details.						
			Debtor 1		Debtor 2			
			Sources of income	Gross income	Sources of income	Gross income		
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$39,700.37	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

Page 35 of 49 Case number (if known) Debtor 1 Lisa M Sady

Debtor		Debtor 1	ebtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)		
( January 1 to December 31, 2016 )		■ Wages, commissions, bonuses, tips	\$35,888.00	☐ Wages, combonuses, tips	ımissions,			
				☐ Operating a business		☐ Operating a	business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips	\$38,028.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include in and other winnings.  List each	come regardle public benefit If you are filin	ess of whetl payments; g a joint case e gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a est; dividends; money collec- rou received together, list it	alimony; child supp cted from lawsuits; only once under Do	royalties; an ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pav	ments You	Made Before You Filed for I	Bankruntcv			
Are either Debtor 1's or Debtor 2  No. Neither Debtor 1 nor Debtor 1 nor Debtor 2 nor Include  * Subject to adjustmen  Yes. Debtor 1 or Debtor 2 nor Debtor 3 nor				Debtor 2 has primarily consular personal, family, or household pre you filed for bankruptcy, die 7.  Deach creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consular you filed for bankruptcy, die personal pre you filed for bankruptcy, die personal present a person	Imer debts. Consumer debtd purpose."  d you pay any creditor a totatd a total of \$6,425* or more the for domestic support oblinis bankruptcy case. Is after that for cases filed or imer debts.  d you pay any creditor a totatd a total of \$600 or more an	al of \$6,425* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more? d the total amount	yments and the nild support a suppor	he total amount you and alimony. Also, do
	Creditor	's Name and	Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for
Toyota Motor Credit Corp P.O. Box 2958, WF21 Torrance, CA 90509-2958		9/27/17;10/25/ 11/29/17		\$0.00	☐ Mortgag ☐ Car ☐ Credit (☐ Loan R ☐ Supplie	Card		

□ Other

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De	btor 1	Lisa M Sady	Document F	Cas	e number ( <i>if known</i> )				
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corp of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
		No Yes. List all payments to an insider.							
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.								
	_	No Yes. List all payments to an insider							
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name		
Pai	rt 4:	Identify Legal Actions, Repossession	ns and Foreclosures						
9.	List al modifi	n 1 year before you filed for bankrupte Il such matters, including personal injury ications, and contract disputes.							
	_	Yes. Fill in the details.							
	Case title Case number		Nature of the case	ature of the case Court or agency		Status of the case			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	_	No. Go to line 11. Yes. Fill in the information below.							
	Cred	litor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened							
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No								
		Yes. Fill in the details.							
	Cred	litor Name and Address	Describe the action the	creditor took	Date :	action was	Amount		
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the bene	fit of creditors, a		
	_	No Yes							
Pai	rt 5:	List Certain Gifts and Contributions							
13.	<b>I</b>	n 2 years before you filed for bankrup	tcy, did you give any gifts	with a total value	of more than \$60	0 per person?	•		
		Yes. Fill in the details for each gift.	Deceribe the wife-		Data		Valer		
	GITTS	s with a total value of more than \$600	Describe the gifts		Dates	s you gave	Value		

per person

Address:

Person to Whom You Gave the Gift and

the gifts

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Will Compare the form the first of the f								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No							
	Yes. Fill in the details for each gift or o	oontribu	tion					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,			
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property			
	how the loss occurred Includ		e the amount that insurance has paid. List pending nce claims on line 33 of <i>Schedule A/B: Property</i> .	loss	lost			
Par	t 7: List Certain Payments or Transfer	·e						
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition processing the No   Yes. Fill in the details.  Person Who Was Paid	prepari	id you or anyone else acting on your behalf paying a bankruptcy petition? rs, or credit counseling agencies for services require  Description and value of any property transferred		Amount of			
	Address Email or website address Person Who Made the Payment, if Not You DAVID A. LADIZKI, P.C. 46 SUFFIELD STREET AGAWAM, MA 01001-1753 david@ladizkilaw.com		transferred	made	payment			
			Attorney Fees	9/7/17; 12/5/17	\$2,335.00			
	Access Counseling, Inc. 633 W. 5th Street Suite 26001 Los Angeles, CA 90071		Credit Counseling course	11/12/17	\$25.00			
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha  No Yes. Fill in the details.	ditors o		or transfer any prope	rty to anyone who			
	- rec. r iii iii tilo dotallo.		Description and value of any property	Data naument	Amount of			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 Lisa M Sady

8.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already  No	usiness or financial affa de as security (such as t	airs? the granting of a s				
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v property transfer		payme	be any property or ents received or debts a exchange	Date transfer was made	
	Person's relationship to you				-		
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		y property to a s	self-settled	d trust or similar device	of which you are a	
	No Yes, Fill in the details.						
	Name of trust	Description and v	value of the prop	erty trans	ferred	Date Transfer was	
	Nume of trust	Description and V	ande of the prop	city trails	iciicu	made	
Par	t 8: List of Certain Financial Accounts, Ins	truments. Safe Deposit	Boxes, and Sto	rage Units	5		
	·	•	•	•			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	, were any financial ac	counts or instru	ıments hel	d in your name, or for y	our benefit, closed,	
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
	Yes. Fill in the details.						
·	Name of Financial Institution and	Last 4 digits of	f Type of account or		Date account was	Last balance	
	Address (Number, Street, City, State and ZIP Code)	account number	J.		closed, sold, moved, or transferred	before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)			the contents	Do you still have it?	
Dar	t 9: Identify Property You Hold or Control f	for Someone Fise					
ı aı	identify Property Tou Hold of Control I	or someone Lise					
23.	Do you hold or control any property that son for someone.	neone else owns? Inclu	ude any property	y you borr	owed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe (	the property	Value	
Par	t 10: Give Details About Environmental Info	rmation					
-or	the nurnose of Part 10 the following definition	ons anniv					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 17-31030 Doc 1 Filed 12/11/17 Entered 12/11/17 10:10:17 Desc Main Page 39 of 49
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Debtor 1 Lisa M Sady

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.								
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.								
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	re you notified any governmental unit of	any release of hazardous material?						
	■ No □ Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice			
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	— hin 4 years before you filed for bankrupt	cy, did you own a business or have an	v of	the following connections to any	husiness?			
		☐ A sole proprietor or self-employed in		•	•				
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing exc	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
		No. None of the above applies. Go to F	art 12.						
		Yes. Check all that apply above and fill	in the details below for each business	i.					
		siness Name dress	Describe the nature of the business		Employer Identification number				
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.				
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o an	Dates business existed by a point about your business? Inclu	de all financial			
	_	Ma							
		No Yes. Fill in the details below.							
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued						
		<b>-</b>							

Part 12: Sign Below

Page 40 of 49 Case number (if known) Debtor 1 Lisa M Sady are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C./S§ 152, 1341, 1519, and 3571./ Lisa M Sady Signature of Debtor 2 Signature of Debtor 1 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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☐ Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

Doc 1

Case 17-31030

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Fill in this infor	mation to identify y	our case:						
Debtor 1	Lisa M Sady		LackName					
Debtor 2	First Name	Middle Name	Last Name					
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS							
Case number					Check if this is an			
					amended filing			
Official Form 108								
Stateme	Statement of Intention for Individuals Filing Under Chapter 7 12/15							

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who Have	Secured	Claims
ган.	LISL I OUI	CIEUILUIS	WIIIO nave	Secureu	Ciallii

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?	
Creditor's ditech Financial, LLC	■ Surrender the property.	□No	
name:  Description of property securing debt:  Description of property Springfield, MA 01089  Hampden County Market value - Sale price.	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	■ Yes	
Creditor's Toyota Financial Services name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□No	
Description of property securing debt:  2017 Toyota Rav4 8700 miles Basic package - in good condition w 1 dent - KBB private sale value	□ Retain the property and enter into a  Reaffirmation Agreement. □ Retain the property and [explain]:  retain and continue making payments	■ Yes	

### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

### Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Lisa M Sady	Case number (if known)	
Lessor's name:	□ No	
Description of leased Property:		
Property.	☐ Ye	S
Lessor's name:	□ No	
Description of leased Property:	П у.	_
r roperty.	☐ Ye	\$
Lessor's name:	□ No	
Description of leased Property:	П v-	_
. Toperty.	☐ Ye	5
Lessor's name:	· □ No	,
Description of leased		
Property:	☐ Ye	\$
Lessor's name:	· □ No	
Description of leased	<u>_</u>	
Property:	☐ Ye	S
Lessor's name:	□ No	1
Description of leased	<u>_</u>	
Property:	☐ Ye	S
Lessor's name:	. □ No	1
Description of leased	· <b>—</b>	
Property:	☐ Ye	S
Part 3: Sign Below		
Inder penalty of perjury, I declare that I have indicated marroperty that is subject to an unexpired lease.	my intention about any property of my estate that secures a	debt and any personal
The m		
x sady	X Signature of Debtor 2	
Lisa M Sady Signature of Debtor 1	Signature of Deptor 2	
Cignitity of Debtor 1		
Date 12/11/20//	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	15	filing fee	
\$7	75	administrative fee	
+ \$^	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-31030 Doc 1 Filed 12/11/17 Entered 12/11/17 10:10:17 Desc Main Document Page 47 of 49

### United States Bankruptcy Court District of Massachusetts

		•	• •		
In re	Lisa M Sady		Case No.		
		Debtor(s)	Chapter	7	

### **VERIFICATION OF CREDITOR MATRIX**

					·	
The abo	ove-named Debtor hereby	y verifies that the attac	hed-list of cred	itors is true and cor	rect to the best of his/h	er knowledge.
	10/1/17		Y	M		
Date:	14/11/1		//ww	///· XIQ	ay	
	• •	į en	Lisa/M Sady	· · · · · · · · · · · · · · · · · · ·	/	
			Signature of D	ebtor	$\mathcal{J}$	

American Express Po Box 297871 Fort Lauderdale, FL 33329

Capital One USA NA P.O. Box 30281 Salt Lake City, UT 84130

Carter Business Service, Inc. 150A Andover Street, Suite 12A Danvers, MA 01923

Central Credit Services LLC 9550 Regency Square Blvd, Suite 500 Jacksonville, FL 32225-8169

Chase - Cardmember SErvice P.O. Box 15298 Wilmington, DE 19850-5298

COMCAST 676 Island Pond Road Manchester, NH 03109-4840

Comenity Bank
Bankruptcy Department
P.O. Box 182125
Columbus, OH 43218-2125

Country Door 1515 S 21st St. Clinton, IA 52732

Discover Card
Bankruptcy Department
PO BOX 30943
Salt Lake City, UT 84130

ditech Financial, LLC P.O. Box 6154 Rapid City, SD 57709-6154

EGS Financial Care, Inc. 4740 Baxter Road Virginia Beach, VA 23462

GC Services Limited Partnership Collection Agency Division 6330 Gulfton Houston, TX 77081

Ginny's 1515 S 21st Street Monroe, WI 53566-1364 Merrick Bank Corp P.O. Box 9201 Old Bethpage, NY 11804-9001

Seventh Avenue 1515 S 21st Street Monroe, WI 53566-1364

Synchrony Bank Attn: Bankruptcy Department P.O. Box 965060 Orlando, FL 32896-5060

Through the Country Door 1515 S 21st Street Monroe, WI 53566-1364

Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52409-8026

Toyota Financial Services Asset Protection Department P.O. Box 2958 Torrance, CA 90509-2958